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TO: Jeannie Severson and Candy Marsh, Co-Executive Directors
Ray Brenteston, Chairman of the Board of Directors

FROM: Connie Wethem, Quality Improvement Specialist

SUBJECT: ~~Glenwood, Inc.~~ Quality Assurance Review

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On March 22nd, 23rd and 24th, 2004 Novelene Martin and I completed a review of Glenwood, Inc.'s services. The review was for the past year February 2003 through February 2004.

The process included:

1. A desk review of data collected through the review period including but not limited to: incident reports trends, medication errors, Adult Protective Services issues, Client Rights, IP issues and a review of licensing, accreditation and fiscal reports, etc.
2. An on-site review involving checking agency and client's records, client and staff interviews and observations at the different facilities.
3. A review of quarterly reports for assessing quality of services provided.

During the review the use of Quality Assurance Observation Sheets (QAOS) were used to record exemplary practices and indicated deficiencies. The QAOS's record what is observed and which Administrative rule or Contract Requirement is surpassed or deficient. There were seven exemplary and ten deficiency QAOS written during this review.

During this review, an individual from each service area was randomly selected. We reviewed the selected person's IP, assessments, training programs, service objectives and data collected. We also did our client interview with the selected person or with staff that provide direct care services to them.

**General Areas
Administrative:**

Glenwood received a three year CARF Accreditation in August 2000 and has chosen not to go through accreditation at this time. The group home was licensed and there were no deficiencies noted. Financial reports and audit reports were looked at and everything was good with the exception of documentation of staff working so that staff ratios were met. Administrative staff's time was not

documented as direct care when the staff filled in for direct care hours. No reports went to APS during this review period. Most problems or concerns noted in the last quality assurance review were corrected or addressed. Many changes have occurred at GWI during this past year. GWI had 2 clients port their services to another agency in another town. New executive co-directors are in place.

Orientation training for new staff is well documented and broken out per specific job duties. The development and use of the "aid orientation questionnaire" should be helpful to measure staff's understanding of the material (QAOS #1).

The Consumer Handbook for each area of service includes a description of the staff (employees) credentials (QAOS #4).

During staff interviews, staff didn't know the mandatory reporting requirements for suspected abuse, neglect and exploitation (QAOS #8). Glenwood has since posted a notice in each facility by the telephones explaining the requirements and who to report to. These notices were reviewed with staff.

While GWI submitted an Incident Reporting Policy to DDP last year, we were unable to locate this policy in any of the policy manuals (QAOS #9). When interviewed, staff were unaware of the existence of this policy. GWI has since put the policy in the manual so that staff have access to it.

During the review of the policy manual, we were unable to locate a policy on involving a consumer in the hiring process (QAOS #15). Glenwood has since developed a policy for this purpose and has been approved by the BOD and has been added to their policy manual.

Residential Health and Safety:

The individuals living at the Transitional Living Complex have a wonderful amount of control and choice in their lives. Numerous improvements at the transitional living complex were noted (QAOS #5). There is a walkway between buildings and the hallways in the buildings were well lighted. There is now a common area for the individuals to visit and use for recreation or leisure activities with their apartment mates. Medication storage and administration is improved. Overall, TLC is a cleaner, friendlier place for the people who live there.

One apartment did not have a second egress from her sleeping area and we found no emergency ladder (QAOS #13). This could present a risk if her apartment door was blocked by fire. Glenwood responded to this concern by stating that 'red dots' were placed inside and out of the bedroom window to alert the fire department and/or emergency providers that they were needed to assist her in an emergency. While in the apartment, the door onto the patio was blocked by an end table and several electrical cords (QAOS #12). This could present a hazard if they were to have to evacuate through this door. Glenwood fixed this problem by assisting in moving the items that were blocking the exit and by having the maintenance man fix the door from sticking so that there was easy access. The fire escape plans in the apartments at TLC showed where a fire extinguisher was to be available in the various apartments. We were unable to locate the extinguishers where indicated (QAOS #14). Glenwood has updated all the diagrams to accurately reflect the locations of all extinguishers.

Dead of the night fire drills were conducted and documented in all residential facilities (QAOS #2). Fire drills were run each month in all facilities.

Glenwood has developed a policy to cover a wide range of emergency procedures (QAOS #6). The procedures cover severe weather, utility outages, tornadoes and gas leaks.

All staff that assisted with medication delivery were med certified. Meds were kept in a locked area.

All the bedrooms at the group home were wonderfully decorated (QAOS #3). The home is clearly decorated to the tastes to the individuals who live there. We noticed good interactions between the staff and the people who live at the group home. People were treated with dignity and respect.

We found no evidence of integrated community outings at the group home during the month of March (QAOS #16). Glenwood stated there were many reasons for this, some reasons were short staffed and bad weather. Glenwood stated that they have reviewed with staff the importance of the required outings and that staff will try harder in the future.

During staff interviews with group home staff, staff responded to several questions regarding behaviors and how staff would respond, questions of client interaction issues, etc. that they would have to talk to _____ before they would respond to the issue (QAOS #17). Staff seemed unable to make decisions and respond to consumers needs. They rely on _____ to make the decisions. As _____ gets more removed from the day to day ongoing issues and activities at the group home, it will be more important for the staff to feel confident to make decisions. Glenwood responded that the WAC staff are given techniques to enable them to think for themselves. This should be a total Glenwood training.

During the review, over-the-counter medication sheets were not available for some folks (QAOS #10). Also, some that were available were signed by a doctor, but no approval or disapproval was noted. Glenwood has since modified the general physical forms to include a personalized OTC medication section and has only one area for the doctor to sign.

Service Planning and Delivery:

All service objectives reviewed included a good description of the expectation of consumers and how staff can assist the individual (QAOS #7).

The assessment completed for _____ rates here mobility and safety with 0's and 1's (QAOS #11). Her IP indicates she can be left alone, can evacuate and can go into the community without supervision. We were uncertain how the team reached this decision. There would be a potential risk if the assessment is accurate. Glenwood responded that the "mobility" and "safety skills" sections of the assessments will be broken down as they are too general and don't truly reflect what skills the individuals possess.

Work/Day/Community Employment Health and Safety

All staff that assist with medication delivery are med certified. Medications were kept in a locked cabinet.

Fire drills are run each month and documentation is kept. All fire extinguishes were up to date and accessible.

There was good interaction noted at the work center between staff and the people who Glenwood provides services to. There were numerous activities to chose from and people were busy.

Community Supports

Glenwood provides community supports to one individual. There were no problems noted. The consumer of service stated that he was happy with the services he received.

Conclusion

I wish to thank everyone at Glenwood for the assistance we received in doing this review. I appreciate the services that the people were receiving and saw many examples of exemplary services being offered to the people that Glenwood served.